SPECIALTY QUALIFICATION TRAINING CARD <u>AGENCY LIAISON</u>			
NAME (Last, First, MI)	CAPID	DATE ISSUED	
Prerequisites			
Item Qualified GES		Date Completed	
Qualified Operations Section Chief or Planning Section Chief			
At least 21 years of age			
The above listed member has completed the required prerequisite training for issuance of the CAPF 101T-AL.			
UNIT/WING/REGION COMMANDER OR AUTHORIZED DESIGNEE'S SIGNATURE DATE			
Familiarization and Preparatory Training			
		CAPID and	
Task		ompleted	
Demonstrate knowledge of principles and features of I	CS		
Demonstrate knowledge of the ICS Organization			
Demonstrate knowledge of incident facilities			
Demonstrate knowledge of incident resources			
Demonstrate knowledge common responsibilities in I	CS		
Demonstrate knowledge of organization and staffing			
Demonstrate knowledge of organizing for incidents & events			
Demonstrate knowledge of incident resources management	ent		
Demonstrate knowledge of air operations			
Demonstrate knowledge of incident and event planni	-		
Demonstrate knowledge of the responsibilities and issues the command and general staff	of		
Demonstrate knowledge of unified command			
Demonstrate knowledge of major incident manageme	ent		
Demonstrate knowledge of area command			
Demonstrate knowledge of multi-agency coordination			
The above listed member has completed the required familiarization and preparatory training requirements for the Agency Liaison specialty qualification and is authorized to serve in that specialty while supervised on training or actual missions.			
UNIT/WING/REGION COMMANDER OR AUTHORIZED DESIGNEE'S SIGNATURE	DAT	E	
CAPF 101T-AL, MAY 01 OPR/ROUTING: DOS PREVIOUS EDITION (101T, OCT 95) WILL NOT BE USED AFTER 31 OCTOBER 2001			

Advanced Training			
	Trainer's CAPID and		
Task	Date Completed		
Demonstrate the ability to select and establish a suitable			
Staging area Demonstrate the ability to select an incident staff			
Demonstrate the ability to conduct a major incident briefing			
Demonstrate the ability to coordinate with other agencies			
Demonstrate the ability to keep a log			
Demonstrate the ability to closeout an incident including completion of CAPF 115			
Complete Flight Release Officer Training			
Complete the current continuing education examination for agency liaisons			
Exercise Participation The above listed member satisfactorily participated as an Agency Liaison trainee under my direct supervision on mission number			
QUALIFIED SUPERVISOR'S SIGNATURE	DATE		
The above listed member satisfactorily participated as an Agency Liaison trainee under my direct supervision on mission number			
QUALIFIED SUPERVISOR'S SIGNATURE	DATE		
Unit Certification and Recommendation The above listed member has completed the requirements for the Agency Liaison specialty qualification and is authorized to serve in that specialty on training or actual missions. This document can be used in lieu of a CAPF 101 until a new CAPF 101 is received reflecting your upgraded specialty.			
UNIT/WING/REGION COMMANDER OR AUTHORIZED DESIGNEE'S SIGNATURE	DATE		
CAPF 101T-AL, MAY 01 REVERSE			